

# CLAIMS AS FILED - PART I

10/535182

SMALL ENTITY  
TYPE ☐

OR  
OTHER THAN  
SMALL ENTITY

|                                                           | (Column 1)                                                            | (Column 2)                             |
|-----------------------------------------------------------|-----------------------------------------------------------------------|----------------------------------------|
| U.S. NATIONAL STAGE FEES                                  |                                                                       |                                        |
| BASIC FEE                                                 | SMALL ENT. = \$ 150                                                   | LARGE ENT. = \$ 300                    |
| EXAMINATION FEE                                           | Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100                      | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE                                                | U.S. is ISA = \$ 50 / \$ 100<br>ALL other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE FOR EXTRA SPEC. PGS.                                  | minus 100 =                                                           | / 50 =                                 |
| TOTAL CHARGEABLE CLAIMS                                   | 13 minus 20 =                                                         |                                        |
| INDEPENDENT CLAIMS                                        | 4 minus 3 =                                                           | 1                                      |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                                                                       |                                        |

| RATE       | FEE |
|------------|-----|
| BASIC FEE  |     |
| EXAM. FEE  |     |
| SEARCH FEE |     |
| X \$ 125 = |     |
| X \$ 25 =  |     |
| X \$ 100 = |     |
| + \$ 180 = |     |
| TOTAL      |     |

| RATE       | FEE  |
|------------|------|
| BASIC FEE  | 300  |
| EXAM. FEE  | 200  |
| SEARCH FEE | 400  |
| X \$ 250 = |      |
| X \$ 50 =  |      |
| X \$ 200 = | 200  |
| + \$ 360 = |      |
| TOTAL      | 1100 |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

*Rye Amet a*  
*5/10/05*

|                                                                         | (Column 1)                       | (Column 2)                         | (Column 3)    |
|-------------------------------------------------------------------------|----------------------------------|------------------------------------|---------------|
| AMENDMENT A                                                             | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total                                                                   | 13                               | 20                                 |               |
| Independent                                                             | 4                                | 4                                  |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 =        |                |
| X \$ 100 =       |                |
| + \$ 180 =       |                |
| TOTAL ADDIT. FEE |                |

OR  
OTHER THAN  
SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50 =        |                |
| X \$ 200 =       |                |
| + \$ 360 =       |                |
| TOTAL ADDIT. FEE |                |

|                                                                         | (Column 1)                       | (Column 2)                         | (Column 3)    |
|-------------------------------------------------------------------------|----------------------------------|------------------------------------|---------------|
| AMENDMENT B                                                             | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total                                                                   |                                  |                                    |               |
| Independent                                                             |                                  |                                    |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 =        |                |
| X \$ 100 =       |                |
| + \$ 180 =       |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50 =        |                |
| X \$ 200 =       |                |
| + \$ 360 =       |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.